EFFECTIVE WITH THE JUNE 9, 10, 11 2003 LANDSCAPE ARCHITECT EXAMINATION Filing Deadline March 10, 2003

(PLEASE DISREGARD THE FEES INDICATED IN THE APPLICATION)

The Landscape Architect examination fees have been increased by CLARB. Submit the following fees for the sections you are applying for:

	Exa	am Fees	Admin. Fees
Section A – Legal & Administrative Aspects of Practice	*	\$60	\$10
Section B – Analytical Aspects of Practice	*	\$100	\$10
Section C – Planning & Site Design		\$200	\$10
Section D – Structural Considerations and Materials and			
Methods of Construction	. *	\$160	\$10
Section E – Grading, Drainage and Storm Water Management	. *	\$200	\$10
Hawaii State Exam – Hawaii Plant Materials		\$30	

- * Make separate postal money order for each part payable to: CLARB
- Make Admin fees payable to: Commerce & Consumer Affairs

FUTURE FEES (subject to change)

EFFECTIVE WITH THE JUNE 14, 15, 16 2004 EXAMINATION Filing Deadline March 10, 2004

	Exa	am Fees	<u>Admin. Fees</u>
Section A – Legal & Administrative Aspects of Practice	*	\$65	\$10
Section B – Analytical Aspects of Practice		\$105	\$10
Section C – Planning & Site Design	*	\$215	\$10
Section D – Structural Considerations and Materials and			
Methods of Construction	. *	\$170	\$10
Section E – Grading, Drainage and Storm Water Management	. *	\$215	\$10
Hawaii State Exam – Hawaii Plant Materials		\$30	

REQUIREMENTS FOR LICENSURE - LANDSCAPE ARCHITECT

LICENSURE THROUGH ENDORSEMENT

REQUIREMENTS

If you are currently licensed in another jurisdiction, you may become licensed through endorsement if you:

- 1. Hold a current and valid license:
- 2. Possess the proper education and/or experience as contained below;
- 3. Passed the Board-produced exam on Hawaiian Plant Materials; and
- 4. Passed the CLARB exam or the equivalent; or
- 5. Have at least 20 years of landscape architectural work in which you were in responsible charge.

EDUCATION & EXPERIENCE

You must have one of the following:

- 1. Masters degree in landscape architecture from an approved institution, graduate of a 4-year landscape architectural curriculum from an approved school or college, **and** 2 years lawful landscape architectural experience or part-time equivalent; **or**
- 2. Graduate of a 4-year landscape architectural curriculum from an approved school or college, **and** 3 years lawful landscape architectural experience or part-time equivalent; **or**
- 3. Graduate of a 4-year pre-landscape architectural or arts and science curriculum from an approved school or college, **and** 5 years lawful landscape architectural experience or part-time equivalent; **or**
- 4. 12 years lawful landscape architectural experience or part-time equivalent in lieu of a degree.

NOTE: To be acceptable, your experience must have been under the supervision of a licensed landscape architect. You will need to document your experience in the experience record portion of the application. Additionally, your supervisor(s) will need to verify your experience by completing the "Verification of Supervision" form.

FOREIGN EDUCATION

In addition to the foregoing, graduates of foreign colleges must have their foreign education evaluated if they wish to have their college degree(s) considered.

In order to do this, contact the Licensing Branch at (808) 586-3000 and request an "Application for Evaluation of Foreign Educational Credentials". Complete the form and submit it with the required documents and fee to Educational Credential Evaluators, Inc. (ECE). The address and instructions are on that application form.

Reports are usually prepared by ECE and a copy sent to us within 4-6 weeks following receipt of all required documents.

EXAMINATION (FOREIGN)

If you are licensed and took your exam(s) in a foreign country, you will need to contact that board to have them supply directly to us, the following information in English:

- Your current licensing status;
 Exam(s) taken;
- 3. Date of the exam(s):
- 4. Number of hours of the exam(s);
- Subjects covered;

- 6. Number of questions in each subject area;
- 7. Total number of exam questions;
- 8. Passing score; and
- 9. Grade you obtained.

NOTE: To be acceptable, your exam(s) must be equivalent to those described above.

VERIFICATION OF EXAM/LICENSE

Verification of your **exam scores** and out-of-state license must be accomplished. Send the "Verification of Exam/License" form S-1 to the state in which your were ORIGINALLY LICENSED BY EXAMINATION with the appropriate service fee, if any. Contact your state licensing agency for any charge. If more than one form is needed, in cases where the exams were taken in more than one state, please duplicate.

FEE

Attach the \$75 application fee (check made payable to Commerce and Consumer Affairs).

Note: One of the numerous legal requirements that you must meet in order for your new license to issue is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by the Hawaii Administrative Rules, Title 16, Chapter 201, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing should be directed to the agency that issues your license and must be received within 60 days of the date that your application for a license is denied.

SUBMITTALS

In addition to the application fee of \$75, you will need to do the following:

- 1. Complete the entire application; provide details of your experience in the experience record portion of the application (keeping in mind that "supervisor" refers to licensed landscape architects other than vourself):
- 2. Provide a copy of all pertinent diplomas or official transcript(s) from an approved school or college or ECE report (if you are a graduate of a foreign college);
- 3. Send the "Verification of Exam/License" form, S-1; and
- 4. Provide "Verification(s) of Supervision" forms completed by your supervisor(s), who is a licensed Landscape Architect.

In addition to #1 - 3 above, if you wish to have the CLARB exam waived, you will need to complete the "Verification of Experience in Responsible Charge" form.

LABELS

Print your name and complete mailing address legibly on each label. These labels will be used to notify you of action by the Board on your applications for exam. When completing address on labels, use the abbreviations Apt, Rm or Ste, do not use # sign, periods or commas. The city name should be spelled out in full and zip code after the two-letter state abbreviation.

or

BOARD'S ADDRESS

Mail all required items to:

Board of EASLA

Deliver to office location at:

DCCA, PVL Licensing Branch P. O. Box 3469

1010 Richards St., 1st Flr.

Honolulu, HI 96801

Honolulu, HI 96813

CERTIFICATION OF LAWS AND **RULES**

In addition to the examination requirements, you must certify to reading, understanding, and agreeing to comply with the laws and rules that the board determines are required for licensure.

LAWS & RULES

To obtain a copy of the laws and rules, send \$1.75 to: CASHIER, COMMERCE & CONSUMER AFFAIRS, P.O. Box 541, Honolulu, Hawaii 96809. Price subject to change without notice. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Law may be purchased separately for 50¢.

LICENSE FEES

After all requirements are fulfilled, license fees will be due. Notification of amounts will be sent to you at the appropriate time.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, expire on April 30 of each EVEN-NUMBERED year and are subject to renewal by the license expiration date. To ensure receipt of the renewal application which is mailed about 60 days prior to the license expiration date keep the board's office informed of your current mailing address. Renewals received after the license expiration date are subject to late renewal fees and may be restored up to 2 years. After 2 years, a new application for licensure is required.

LICENSURE THROUGH EXAMINATION

EXAMINATION & DEADLINE

The CLARB exam is used and given once a year in June. The filing deadline is March 10.

POSTPONE OR WITHDRAWAL FROM EXAM

Written notice of your inability to be present at the examination you requested for due to postponement or withdrawal must reach the Board's office at least 60 days prior to the first day of the examination.

Requests for postponements shall result in the application of your examination and administration fees applied to the next scheduled examination. Requests for withdrawal shall result in a refund of your examination and administration fees.

Failure by applicants to provide written notice to postpone or withdraw from the examination within the period stated above shall result in the forfeiture of your administration fee and examination fee.

APPLICANTS WITH SPECIAL NEEDS

If you are requesting special testing arrangements due to a disability, call (808) 586-2711 immediately to obtain a Disability Certification Form which must be completed by an approved professional, and submitted preferably prior to your exam application, but no later than the exam filing deadline. Determination of qualification for special testing arrangements will then be made and if so, the type of special testing arrangements to be provided.

No action will be taken to provide special testing arrangements until your exam application has been approved.

EDUCATION & EXPERIENCE

You must have one of the following:

- 1. Masters degree in landscape architecture from an approved institution, graduate of a 4-year landscape architectural curriculum from an approved school or college, **and** 2 years lawful landscape architectural experience or part-time equivalent; **or**
- 2. Graduate of a 4-year landscape architectural curriculum from an approved school or college, **and** 3 years lawful landscape architectural experience or part-time equivalent; **or**
- 3. Graduate of a 4-year pre-landscape architectural or arts and science curriculum from an approved school or college, **and** 5 years lawful landscape architectural experience or part-time equivalent; **or**
- 4. 12 years lawful landscape architectural experience or part-time equivalent in lieu of a degree.

NOTE: To be acceptable, your experience must have been under the supervision of a licensed landscape architect. You will need to document your experience in the experience record portion of the application. Additionally, your supervisor(s) will need to verify your experience by completing the "*Verification of Supervision*" form. Your experience must be gained by March 10, the filing deadline.

FOREIGN EDUCATION

In addition to the foregoing, graduates of foreign colleges must have their foreign education evaluated if they wish to have their college degree(s) considered.

In order to do this, contact the Licensing Branch at (808) 586-3000 and request an "Application for Evaluation of Foreign Educational Credentials". Complete the form and submit it with the required documents and fee to Educational Credential Evaluators, Inc. (ECE). The address and instructions are on that application form.

Reports are usually prepared by ECE and a copy sent to us within 4-6 weeks following receipt of all required documents.

FEES

Attach the \$75 application fee (check made payable to Commerce and Consumer Affairs); and a separate payment for the applicable exam fee listed below.

Attach a separate payment for the exam fees. It will be returned to you uncashed if your application is not approved.

l l	Exam Fees	Admin. Fees
Section A - Legal & Administrative Aspects of Practice	* \$ 45	** \$10
Section B - Analytical Aspects of Practice	* \$ 85	** \$10
Section C - Planning and Site Design	* \$175	** \$10
Section D - Structural Considerations and Materials and		
Methods of Construction	* \$140	** \$10
Section E - Grading, Drainage and Storm Water Management	* \$175	** \$10
Hawaii State Exam		** \$30

^{*} Make separate postal money order for each part payable to: CLARB

SUBMITTALS

In addition to the application fee of \$75, you will need to do the following:

- Complete the <u>entire</u> application; provide details of your experience in the experience record portion of the application (keeping in mind that "supervisor" refers to licensed landscape architects other than yourself);
- 2. The applicable exam fee(s);
- 3. The applicable exam administration fee(s);
- 4. Provide a copy of all pertinent diplomas or official transcript(s) from an approved school or college or ECE report (if you are a graduate of a foreign college); and
- 5. Provide "Verification(s) of Supervision" forms completed by your supervisor(s), who is a licensed Landscape Architect.

LABELS

Print your name and <u>complete</u> mailing address legibly on each label. These labels will be used to notify you of action by the Board on your application for exam. When completing address on labels, use the abbreviations Apt, Rm or Ste, do not use # sign, periods or commas. The city name should be spelled out in full and zip code after the two-letter state abbreviation.

or

BOARD'S ADDRESS

Mail all required items to:

Board of EASLA DCCA, PVL Licensing Branch P. O. Box 3469 Honolulu, HI 96801 Deliver to office location at:

1010 Richards St., 1st Flr. Honolulu, HI 96813

(CONTINUED ON BACK)

^{**} Make check payable to: COMMERCE & CONSUMER AFFAIRS

"COMPLETE" APPLICATIONS

Only "complete" applications are considered by the Board. An application is considered complete only after all documents are received. Therefore, you are responsible for insuring that all the "Verification(s) of Supervision" forms are submitted by March 10.

CERTIFICATION OF LAWS AND RULES

In addition to the examination requirements, you must certify to reading, understanding and agreeing to comply with the laws and rules that the board determines are required for licensure.

LAWS & RULES

To obtain a copy of the laws and rules, send \$1.75 to: CASHIER, COMMERCE & CONSUMER AFFAIRS, P.O. Box 541, Honolulu, Hawaii 96809. Price subject to change without notice. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Law may be purchased separately for 50¢.

LICENSE FEES

After all requirements are fulfilled, license fees will be due. Notification of amounts will be sent to you at the appropriate time.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, expire on April 30 of each EVEN-NUMBERED year and are subject to renewal by the license expiration date. To ensure receipt of the renewal application which is mailed about 60 days prior to the license expiration date keep the board's office informed of your current mailing address. Renewals received after the license expiration date are subject to late renewal fees and may be restored up to 2 years. After 2 years, a new application for licensure is required.

	Exam Admin	258	\$10 x9	6	1/2	Renewal	240 BCF	\$40
	App	(CON	TINUED ON BAC \$75'	CK)	CF	RF	C13	\$35/\$70
ED Indicate if with uni Degree,								
EDU ite if S י univ∈ ree, as	Other College/University							
EDUCATION Indicate if School of L. Arch. with university & clarify Degree, as "B in L. Arch."								
ON of L. ^μ & clarii L. Arc								
Vrch. fy ih."	College/University							
	Name & Location of Sch		(Mo/Yr) To	Date Gradua		Degree Received	Technical	Course
	e any disciplinary actions pending a N 'YES' RESPONSES, PROVIDINO	G DATES, PLACES, ANI	D TYPE OF C	ONVICTIO	N OR DIS	CIPLINARY AC		YES NO ARATE SHEET.
` ,	license ever been suspended, rev	•		•				YES NO
	ast 20 years have you been convict nulled or expunged?							YES NO
. ,	a U.S. citizen, a U.S. national, or a							YES NO
(1) Are you	at least 18 years of age?							YES NO
Employer's Na	me. Address & Phone No.							
Social Security	/ Number	Phone No. (days)			Other Na	ames used:		
					License I	No.	Date Li	censed
Mailing Addres	ss (if different from above)							
Residence Add	dress (Include Apt. No., City, State & Zip	p Code)						
Legal Name (F	irst, Middle-LAST)			FOR E				
	plication for Examination.			BOARD				
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Architects	wall board of Engineers, Archit	ecis, Land Surveyors	& Lanuscap		S-1:		Verif of Resp. Cha	arge:
State of Hay	waii Board of Engineers, Archit	octe Land Surveyors	g I andscan		Verif of	Supvsr:		
APPLICAT	TION FOR LICENSURE - LA	NDSCAPE ARC	CHITECT		Deg:		Foreign ECE:	

EAS-07 0600R

5	DATES (mo/yr) TIME (yrs & mos)			TITLE OF POSITION, NAME OF EMPLOYER & CHARACTER OF EACH EMPLOYMENT. Designate each employment or change in position by a separate	YOUR SUPERVISOR		
ENGAGEMENT NUMBER	FROM	то	TOTAL TIME	letter and a ruled line extending across page. Include magnitude & complexity of work on which engaged, your duties & degree of responsibility. Have in mind that the Examining Committee is more interested in your specific duties rather than the number of persons employed or over-all cost of projects.	NAME & ADDRESS	LICENSED LANDSCAPE ARCHITECT?	
				SUMMARY (By Applicant)			
				SUMMARY (By Applicant) TOTAL EXPERIENCE SUMMARY (By Board)			
that, to the	person nam best of my	ned on this knowledge	and belief, the	ng first duly sworn, do depose and say: That I have read this a foregoing statements are true in substance and effect and are aws and rules that the board determines are required for licensu	made in good faith. I also certi		
_		Date		Signa	ture of Applicant		

TITLE OF POSITION, NAME OF EMPLOYER &

VERIFICATION OF SUPERVISION - LANDSCAPE ARCHITECTS

The applicant named below has applied for licensure by examination or endorsement with the Board of Professional Engineers, Architects, Surveyors and Landscape Architects. The Board rules require that an applicant for licensure must have worked for a specified number of years under the supervision of licensed landscape architect(s). To verify this period of supervision, this form shall be completed by the applicant's supervisor and mailed to: **Board of Professional Engineers, Architects, Surveyors and Landscape Architects, P. O. Box 3469, Honolulu, Hawaii 96801.**

Name of Applicant:	Name of Supervisor:	
Name of Employer:	Address of Supervisor:	
The applicant worked under my supervision from	to	Total Yrs Mos
2. During the time indicated above, I was licensed as a:		
a. [] Landscape Architect Certificate No	Date of Licensure	State
b. [] Other Profession of Licensure Certificate No	Date of Licensure	State
3. What was the scope of your supervision?		
4. Please describe specific assignments given to applicant on	projects while under your supervision:	
Other comments regarding the applicant:		
5. Other comments regarding the applicant.		
I hereby certify that the statements and answers contained the best of my knowledge; and the statements given regarding my		l as applicant are true and correct to
	Signature of	of Supervisor
	Date	

VERIFICATION OF EXPERIENCE IN RESPONSIBLE CHARGE

State of Hawaii, Board of Engineers, Architects, Surveyors & Landscape Architects.

I certify that I have knowledge of at least twenty (20) years of landscape architectural experience in which I, (the applicant), was in responsible charge of the landscape architectural work in which I, (the applicant), was engaged. The following is a description of that work. DATES FROM то DESCRIPTION OF LANDSCAPE ARCHITECTURAL WORK Signature of Applicant/Licensed Landscape Architect Date _____

VERIFICATION OF EXAM/LICENSE - ENGINEERS, ARCHITECTS, LAND SURVEYORS, AND LANDSCAPE ARCHITECTS

State of Hawaii

	T			APE ARCHITE					Board of EASLA		
	APPLICANT: Co	mplete top of this pa	age and forward to	o ORIGINAL state	e of license.						
	Name (LAST, First, Middle)					Other Names used:					
A P	Address (Include apt. no., city, state and zip code)					Social Security No.					
P L		Р	Phone No.								
C					Circle type of License Held:						
A N T	License No.		Date Issue	ed		PE AI	ксн	LAND ARCH	LAND SURVEYOR		
		e the licensing agend consumer Affairs, St						to furnis	h to the Department of		
	Date			SIGN HERE	≣:						
PA	ART II - FOR ST	ATE BOARD ON	ILY TO COMP	LETE							
Th	e above-named per	BOARD OF E	EASLA ICENSING BRANC 69		se complete a	II information b	elow, aff	ix your board	seal and mail directly to:		
			ENGINEER					CURRENT 8	& GOOD STANDING		
		PROFESSIONAL ENGINEER	IN TRAINING	ARCHITECT	LANDSCAP ARCHITEC			[] Licen	se is in good standing.		
	rtificate Number te Issued				-			[] If a	ny pending action or past		
	id Until							sanct	tions, please explain on se side.		
Dat	te Applied							lever	se side.		
EIT	accepted from (name	of states):			Indicate DIS	CIPLINE OF EN	GINEERIN	I NG examined in	(Use "NA" if not applicable):		
	Exam	ination Subjects		No. of Hours	Grade Obtained	Passing Grade Require	M	onth & Year Passed	Uniform NCEES, NCARB or CLARB exam?		
BY:											
TITLE								BOARD	SEAL		
DATE	≣:						(if none, pleas	e state none)		